

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
 Jim Gibbons for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Al Rosendahl Mailing Address 15811 Main Street	<b>Transaction ID:</b> SB20A.6806 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 1 0</div> </div>
City State Zip Code Kesley IA 50649 Purpose of Disbursement Refund of General Election Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>400.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Connie Rueter Mailing Address 1621 Glen Oaks Dr City State Zip Code West Des Moines IA 50266 Purpose of Disbursement Refund of General Election Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB20A.6772 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Kim Rueter Mailing Address 1688 U Avenue City State Zip Code Grand Junction IA 50107 Purpose of Disbursement Refund of General Election Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB20A.6773 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**5200.00**

**TOTAL** This Period (last page this line number only) .....